Doc 33 Filed 01/12/22 Entered 01/12/22 16:38:43 Desc Main AMENDED Case 21-15529-VFP

			Document	Page 1 01 c	)
Fill in this in	formation to iden	tify your case:			
Debtor 1	Maria Pinho				
<b>D</b> obtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for t	he: _District of New c	Jersey		
Case number	21-15529			,	Check
(If known)					<b>∠</b> An
					🗖 A s
					inco
Official Fo	rm 106I				MM
Sahad	ula I. V	our Incor	m o		

his is:

nended filing

plement showing postpetition chapter 13 e as of the following date:

D / YYYY

## scheaule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Part 1:

4. Calculate gross income. Add line 2 + line 3.

Fill in your employment information.	Debtor 1	Do	ebtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.  Employment status	☐ Employed ✓ Not employed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.			
Occupation Occupation may include student or homemaker, if it applies.			
Employer's name			
Employer's address			
	Number Street	Num	nber Street
	City State	ZIP Code City	State ZIP Code
How long employed th	ere?		
Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this for spouse unless you are separated.		·	
If you or your non-filing spouse have more than one employ below. If you need more space, attach a separate sheet to		r all employers for that p	person on the lines
			r Debtor 2 or n-filing spouse
<ol><li>List monthly gross wages, salary, and commissions (to deductions). If not paid monthly, calculate what the month</li></ol>		0.00	0.00

0.00

0.00

Debtor 1

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Desc Main AMENDED

For Debtor 1 For Debtor 2 or non-filing spouse 0.00 0.00 Copy line 4 here 5. List all payroll deductions: 0.00 0.00 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. Domestic support obligations 5f 0.00 0.00 5g. 5g. Union dues 0.00 0.00 5h. Other deductions. Specify: 5h. 0.00 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.00 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 1,200.00 0.00 8a monthly net income. 0.00 0.00 8b. Interest and dividends 8b 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 0.00 settlement, and property settlement. 8c. 0.00 0.00 8d. Unemployment compensation 8d. 989.00 2,090.00 8e. Social Security 8e 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 0.00 Specify: 8f. 1,319.45 0.00 8g. Pension or retirement income 8g. 0.00 0.00 8h. Other monthly income. Specify: 8h 2,189.00 3,409,45 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. Calculate monthly income. Add line 7 + line 9. 5,598.45 3,409.45 2,189.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. + Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 5,598.45 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? V No. ☐ Yes. Explain:

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Fill in this	information to identify	your case:						
	Maria Pinho							
Debtor 1	First Name	Middle Name Last	t Name		Check if this			
Debtor 2	ng) First Name	Middle Name Lasi	t Name		<b>∠</b> An amer	nded filir	ng	
		District of New Jersey	t Name		A supple	ment sh	nowing postp	etition chapter 13
United State	es bankruptcy Court for the.	District of New delacy	(Si	tate)	expense	s as of t	he following	date:
Case numb	21-15529 er				MM / DD /	YYYY	_	
Official	Form 106J							
Sche	dule J: Yo	ur Expenses						12/15
information		ssible. If two married people ed, attach another sheet to th						
Part 1:	Describe Your Hou	sehold						
_	Go to line 2.  Does Debtor 2 live in a s	eparate household? e Official Form 106J-2, <i>Expens</i>	ses for Se	eparate Hous	ehold of Debtor 2.			
2. Do you h	ave dependents?	✓No						
Do not lis	t Debtor 1 and	Yes. Fill out this informat	tion for	Dependent's Debtor 1 or D	relationship to ebtor 2		ependent's ge	Does dependent live with you?
Debtor 2.  Do not standards.	ate the dependents'	each dependent				_ _		No Yes No Yes
						_		No Yes No Yes No Yes No Yes
expenses	expenses include s of people other than and your dependents?	V No ☐ Yes						_
Part 2:	Estimate Your Ongoi	ng Monthly Expenses						
expenses a applicable	s of a date after the ban date.	bankruptcy filing date unles kruptcy is filed. If this is a su	uppleme	ental Schedui	le J, check the box		=	="
	=	-cash government assistand I it on Schedule I: Your Incor	-				Your exper	ises
	tal or home ownership e for the ground or lot.	xpenses for your residence.	Include	first mortgage	e payments and	4.	\$	2,539.89
If not in	cluded in line 4:							0.00
4a. Re	al estate taxes					4a.	\$	0.00
4b. Pro	pperty, homeowner's, or re	enter's insurance				4b.	\$	0.00
4c. Ho	me maintenance, repair, a	and upkeep expenses				4c.	\$	0.00

Homeowner's association or condominium dues

0.00

4d.

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Debtor 1 Maria Pinho

First Name Middle Name Last Name

Case number (if known) 21-15529

			Your ex	nancac
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	180.00
	6b. Water, sewer, garbage collection	6b.	\$	40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	268.78
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	30.00
10.	Personal care products and services	10.	\$	40.00
11.	Medical and dental expenses	11.	\$	0.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	50.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incon	ie.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	\$	

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Debtor 1	Maria Pinho First Name Middle Name Last Name  Case number (if	21- known)	-15529	
21. <b>Other</b> . Sp	ecify:	21.	+\$ +\$	0.00
			+\$	
22. Calculate	e your monthly expenses.			
22a. Add I	lines 4 through 21.	22a.	\$	3,248.67
22b. Copy	vine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a	22b.	\$	
and 22b. <sup>-</sup>	The result is your monthly expenses.	22c.	\$	3,248.67
-	your monthly net income.	22-	\$	5,598.45
	y line 12 (your combined monthly income) from Schedule I.	23a.		3,248.67
23b. Copy	y your monthly expenses from line 22c above.	23b.	\$	3,240.07
	ract your monthly expenses from your monthly income.		\$	2,349.78
The	result is your monthly net income.	23c.		
4. Do you ex	pect an increase or decrease in your expenses within the year after you file this form?			
For examp	le, do you expect to finish paying for your car loan within the year or do you expect your			
	payment to increase or decrease because of a modification to the terms of your mortgage?			
<b>✓</b> No.				
☐ Yes.	Explain here:			

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Fill in this inf	formation to identif	fy your case:		
Debtor 1	Maria Pinho	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	<sup>e</sup> District of New Jersey	1	
	21-15529	•		

Check if this is an amended filing

### Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

rney to help you fill out bankruptcy forms?
. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
Signature (Official Form 119).
mmary and schedules filed with this declaration and
Signature of Debtor 2